STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

PLEASE PRINT

JUL 27 2017

| I. Name of Lobbyist(s) OIVIO ZIO | NEW HAMPSHIRE |
|--|---|
| II. Name of lobbyist's partnership, firm or corporation, if any: | DEPARTMENT OF STATE |
| Open Democrary | |
| (Name of partnership, firm or corporation) | 1 |
| Business Address: (Street) Concor | (State) (Zip Code) |
| (603 - 715 - 8197) (Fax) | e-mail |
| III. This statement covers: (Choose one – file separate reports for reportable expense transactions which are not attributable to any | |
| ☐ All reportable transactions occurring in the months prior to the rep | porting date relative to the following client: |
| (Full Name of Client as it appears on the Lobbyist DR | Registration Form) |
| ☐ All reportable transactions by the lobbyist (including the lobbyist's unrelated to any particular client. | s family), or the lobbying firm listed below which are |
| IV. Date of Report April 26, 2017 Reports cover: activity from date of registration to 3/31/17 acti | July 26, 2017 X vity from 4/1/17 to 6/30/17 |
| October 25, 2017 | January 31, 2018 \square ivity from 10/1/17 to 12/31/17 |
| V. There have been no fees received and no reportable trans If this box is checked, complete just this form and submit it to the Secr Concord, NH 03301. | sactions made since the last report. Greatery of State's Office, State House, Room 204, |
| VI. Check if additional reports are attached: | U. A. V. A. Consend Company |
| ☐ If you have received fees or made expenditures, you must file Ad ☐ If you have paid an honorarium or reimbursed expenses, you must Expense Reimbursement | |
| ☐ If you, your firm, or your family has made political contributions, | , you must file Addendum C- Political Contributions |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby and complete to the best of my knowledge and belief. | swear or affirm that the foregoing information is true |
| (Signature of Hobby ist) | 36-2014-7017 (Date) |
| (Print Name of lobbyist) | |

E A S E P R I N

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist's partnership, firm or corporation, if any: | | |
|--|--|--|
| | | |
| | | |
| III. Name of Client | Date | |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, or public relations service | |
| a) Total of all fees received in this reporting period | a) \$ _ 275 · | |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) | b) \$ 542.50 ear) | |
| c) Total of all fees received to date (Add lines a and b) | c)\$ 817.50 | |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ | |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | elient and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses pair expenses; (b) the aggregate total of a e: meals purchased during a business st than \$10 that is given to the persod with a value of \$25.00 or less); and or ting period of greater than \$25.00 for e of greater than \$25, purchase of the expense reimbursement, or political expense reimbursement, or political entry be first than \$25.00 for expense reimbursement, or political entry than \$25.00 for expense reimbursement entry than \$25.00 f | |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported | a)\$275.00 | |
| in a), of \$25 or less. | b) \$ | |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ | |

| d) Total expenses for this reporting period (Add lines a, b and c) | d)s 215. |
|--|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e)\$ 542,50 |
| f) Total of all expenses year to date | ns |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| Salary + BenifitS | s |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. | m that the foregoing information |
| (Signature of lobbyist) | 26-1014-2017 (Date) |
| (Print Name of lobbyist) | |